

UTILITY PATENT APPLICATION TRANSMITTAL <i>(Only for new nonprovisional applications under 37 CFR 1.53(b))</i>		Attorney Docket No. 239798US0	
		First Inventor or Application Identifier Yukiko ISHIKAWA, et al.	
		Title METHOD FOR PRODUCING TARGET SUBSTANCE BY FERMENTATION	
		Assignee Name: Ajinomoto Co., Inc. Assignee Address: 15-1, Kyobashi 1-chome, Chuo-ku, Tokyo, Japan	
APPLICATION ELEMENTS <i>See MPEP chapter 600 concerning utility patent application contents</i>		ADDRESS TO: Commissioner for Patents Mail Stop Patent Application Alexandria, Virginia 22313	
1. <input checked="" type="checkbox"/> Fee Transmittal Form (e.g. PTO/SB/17) <i>(Submit an original and a duplicate for fee processing)</i>		ACCOMPANYING APPLICATION PARTS	
2. <input checked="" type="checkbox"/> Specification Total Sheets 71		7. <input type="checkbox"/> Assignment Papers (cover sheet & document(s))	
3. <input checked="" type="checkbox"/> Drawing(s) (35 U.S.C. 113) Total Sheets 1		8. <input checked="" type="checkbox"/> Application Data Sheet. See 37 CFR 1.76	
4. <input checked="" type="checkbox"/> Oath or Declaration Total Pages 3 <ul style="list-style-type: none"> a. <input checked="" type="checkbox"/> Newly executed (original) b. <input type="checkbox"/> Copy from a prior application (37 C.F.R. §1.63(d)) <i>(for continuation/divisional with box 17 completed)</i> <ul style="list-style-type: none"> i. <input type="checkbox"/> DELETION OF INVENTOR(S) <i>Signed statement attached deleting inventor(s) named in the prior application, see 37 C.F.R. §1.63(d)(2) and 1.33(b).</i> 		9. <input type="checkbox"/> 37 C.F.R. §3.73(b) Statement <input type="checkbox"/> Power of Attorney 10. <input type="checkbox"/> English Translation Document <i>(if applicable)</i> 11. <input type="checkbox"/> Information Disclosure Statement (IDS)/PTO-1449 <input type="checkbox"/> Copies of IDS Citations 12. <input type="checkbox"/> Preliminary Amendment 13. <input checked="" type="checkbox"/> White Advance Serial No. Postcard 14. <input checked="" type="checkbox"/> Certified Copy of Priority Document(s) (1) <i>(if foreign priority is claimed)</i> 15. <input type="checkbox"/> Applicant claims small entity status. <i>See 37 CFR 1.27</i> 16. <input checked="" type="checkbox"/> Other: Request for Priority, Receipt of an Original Deposit of Microorganisms for the Purpose of Patent Procedure (FERM BP-5252, FERM BP-6614, FERM BP-6615, and FERM BP-7207)	
5. <input type="checkbox"/> CD-ROM or CD-R in duplicate, large table or Computer Program (Appendix)		17. If a CONTINUING APPLICATION, check appropriate box, and supply the requisite information below: <input type="checkbox"/> Continuation <input type="checkbox"/> Divisional <input type="checkbox"/> Continuation-in-part (CIP) of prior application no.:	
Prior application information: Examiner: Group Art Unit:			
For CONTINUATION OR DIVISIONAL APPS only: The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 4b, is considered a part of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation <u>can only</u> be relied upon when a portion has been inadvertently omitted from the submitted application parts.			
18. Amend the specification by inserting before the first line the sentence: <input type="checkbox"/> This application is a <input type="checkbox"/> Continuation <input type="checkbox"/> Division <input type="checkbox"/> Continuation-in-part (CIP) of application Serial No. Filed on			
<input type="checkbox"/> This application claims priority of provisional application Serial No. Filed			
19. CORRESPONDENCE ADDRESS			
			
22850 (703) 413-3000 FACSIMILE: (703) 413-2220			

Name:	Norman F. Oblon	Registration No.:	24,618
Signature:		Date:	7/8/03
Name:	N	Registration No.:	

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IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

INVENTOR(S) Yukiko ISHIKAWA, et al.

SERIAL NO: New Application

FILING DATE: Herewith

FOR: METHOD FOR PRODUCING TARGET SUBSTANCE BY FERMENTATION

FEE TRANSMITTAL

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FOR	NUMBER FILED	NUMBER EXTRA	RATE	CALCULATIONS
TOTAL CLAIMS	16 - 20 =	0	x \$18 =	\$0.00
INDEPENDENT CLAIMS	1 - 3 =	0	x \$84 =	\$0.00
<input checked="" type="checkbox"/> MULTIPLE DEPENDENT CLAIMS (If applicable)			+ \$280 =	\$280.00
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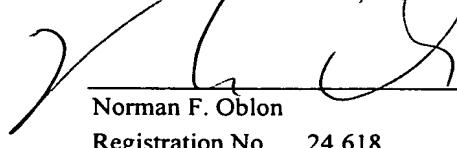
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The Director is hereby authorized to charge any additional fees which may be required for the papers being filed herewith and for which no check is enclosed herewith, or credit any overpayment to Deposit Account No. 15-0030. A duplicate copy of this sheet is enclosed.

Respectfully Submitted,

OBLON, SPIVAK, McCLELLAND,
MAIER & NEUSTADT, P.C.

Date: 7/11/03


Norman F. Oblon
Registration No. 24,618



22850

Tel. (703) 413-3000
Fax. (703) 413-2220
(OSMMN 05/03)